

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H230000138803)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : WILSON TAX & ACCOUNTING INC.

Account Number : 120150000107 Phone : (941)625-1925

Fax Number : (941)625-1526

DISSOLUTION OR WITHDRAWAL SOUTHWEST RESCREEN INC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

01/11/2023 14:03 T-05:00 TO: +18506176380 FROM: 9416251526 X Please See Attached Letter

ARTICLES OF DISSOLUTION

Pursuant to of dissolution		07.1403, Florida Statutes, this Florida profit corporation submits the following articles					
FIRST:		ame of the corporation as currently filed with the Florida Department of State: SOUTHWEST RESCREEN INC					
SECOND:	The d	ocument number of the corporation (if known):					
THIRD:	The d	ate dissolution was authorized:					
	Effect	ive date of dissolution if applicable: (no more than 90 days after dissolution file date)					
	Note: not be	If the date inserted in this block does not meet the applicable statutory filing requirement discounting decisions in the decision of the deci					
FOURTH:		lution was approved by the shareholders, in the manner required by this chapter are icles of incorporation.					
	Signatur	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary) JEFFREY DERIDDER (Typed or printed name of person signing)					
		PRESIDENT					
		(Title of person signing)					

Filing Fee: \$35

A Please See Attached Letter

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation:	SOUTHWEST RE	SCREEN INC		
The above named corp		i the effective date of a dissolution is: _		
	(date filed with the Dept. if date spec	cified in the Articles of Dissolution)		~
Description of informa	tion that must be included in a claim:		TACAL TACAL	1023 JAN 形
DISSOLVING B	USINESS. TIMOTHY DEYO	OUNG WILL BE SUBMITTIN	ÉÃ.	1 <u>EW</u>
COMPANY WIT	H THE SAME NAME		3 2 8	2
		-	mos matt	ထ္
			<u> </u>	3
Mailing address where	written claims can be sent; (Claims car	nnot be sent to the Division of Corpora	tions)	
495 LOVELAN	D BLVD			
PORT CHARLO	TTE, FL 33954			
<u> </u>				
A claim against the abo within 4 years after the	ye named corporation will be barred un filing of this notice.	nless a proceeding to enforce the claim	is com	menced
		$\Omega \Lambda \int$		
JEFFI	REY DERIDDER			
Printe	Name of the Person Filing	Signature of the Person Filin	g	

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

January 11, 2023

To Whom It May Concern:

I, Jeffrey DeRidder, will not revoke the Articles of Dissolution submitted on January 11, 2023, for Southwest Rescreen Inc. document number P14000075078. I voluntarily dissolved this company and Timothy DeYoung will be submitting a new company with the same name.

Thank you for your help in the matter.

Sincerely,

Jeffrey DeRidder

President

1/11/2023

HOLLY DAILEY
Notary Public-State of Florida
Commission # GG 307754
My Commission Expires
March 05, 2023